FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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•	OMB APPE	ROVAL					
	OMB Number:	3235-0076					
İ	Expires:						
	Estimated average burden						
	hours per response 16.0						

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Prefix	Serial
DATE RE	CEIVED
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Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Brazil Ethanol, Inc.	PROCESSED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	
Type of Filing: New Filing Amendment	APR 1 1 2007
	M. M. Tool
A. BASIC IDENTIFICATION DATA	—————— ₹ THOMSON
1. Enter the information requested about the issuer	FINANCIAL
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	,
Brazil Ethanol, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
5 East 75th Street, Suite 3, New York, NY 10021	(315) 210-6558
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	
Operate businesses in the ethanol and sugar production industry in Brazil	RECEIVED
Type of Business Organization	150
✓ corporation ☐ limited partnership, already formed ☐ other (p business trust ☐ limited partnership, to be formed	lease specify):APR 0 2 2007
Month Year	
Actual or Estimated Date of Incorporation or Organization: OII OI7 Actual Estim	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	
CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	

Rederal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

States

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filling of a federal notice.

A. BASIC IDENTIFICATION DATA: Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ■ Beneficial Owner ✓ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Cantonnet, Jorge Business or Residence Address (Number and Street, City, State, Zip Code) 5 East 75th Street, Suite 3, New York, NY 10021 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Robalinho, Frederico Business or Residence Address (Number and Street, City, State, Zip Code) 5 East 75th Street, Suite 3, New York, NY 10021 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Jimenez, Carlos Business or Residence Address (Number and Street, City, State, Zip Code) 5 East 75th Street, Suite 3, New York, NY 10021 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Maranhao, Mandel Gregario Business or Residence Address (Number and Street, City, State, Zip Code) 5 East 75th Street, Suite 3, New York, NY 10021 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Francoia, Marcos Antonio Business or Residence Address (Number and Street, City, State, Zip Code) 5 East 75th Street, Suite 3, New York, NY 10021 Promoter Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Diaz, Mandel Calago Business or Residence Address (Number and Street, City, State, Zip Code) 5 East 75th Street, Suite 3, New York, NY 10021 ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

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2. What is	s the minim	ium mvesm	nent that v	viii be acce	pica irom	any maivid	iuai?		•••••		\$ Yes	
3. Does th	ne offering	permit join	t ownersh:	ip of a sing	le unit?				••••		r es ₽	No □
commi: If a per or state	ssion or sim son to be lis s, list the na	ilar remune ited is an as:	eration for a sociated pe proker or d	solicitation erson or age ealer. If me	of purchas ent of a brok ere than fiv	ers in conn (er or deale e (5) persoi	ection with r registered ns to be list	sales of se d with the S ed are asso	curities in t SEC and/or	lirectly, any the offering. with a state sons of such		
Full Name (N/A	Last name	first, if ind	ividual)									
Business or	Residence	Address (N	Number an	d Street, C	ity, State, Z	Zip Code)						
				• •								
Name of As	sociated Br	oker or De	aler									
States in W	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	- Purchasers				•••		
(Check	"All States	s" or check	individua	l States)				•••••			☐ Al	1 States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
ĪL	IN	ĨΑ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	ÑV	NH	NI	NM	NY	NC	ND	ÖН	OK.	OR	PA
RI	SC	SD	TN	[TX]	UT]	VT.	VA	[WA]	WV	WI	WY	PR
Full Name (Last name	first, if ind	ividual)									
Business or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
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States in Wi	nich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers			<u></u>			
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(Check AL IL MT	AK IN NE	a" or check AZ IA NV	individual AR KS NH	CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND	FL MI OH	GA)	HI MS OR	MO PA
(Check AL IL	AK IN	or check AZ IA	individual	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
(Check IL IL MT RI Full Name (AK IN NE SC	AZ IA NV SD	individual AR KS NH TN	CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	MO PA
(Check AL IL MT RI	AK IN NE SC Last name	AZ. JA. NV. SD. First, if indi	individual AR KS NH TN ividual)	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	MO PA
(Check AL IL MT RI Full Name (N/A Business or	AK IN NE SC Last name	AZ JA NV SD first, if indi	AR KS NH TN ividual)	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	MO PA
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(Check AL IL MT RI Full Name (N/A Business or Name of As.	AK IN NE SC Last name is Residence	AZ JA NV SD first, if indi Address (N	AR KS NH TN ividual) Number an	CA KY NJ TX d Street, C	CO LA NM UT ity, State, 2	CT ME NY VT Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		,
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)	s 150,000,000.0	10,434,000.00
	Partnership Interests	S	\$
	Other (Specify)		
	Total	150,000,000.00	© 10.434,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	ν	<u> </u>
2.;	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	10	\$_10,434,000.00
	Non-accredited Investors	<u>o</u>	\$_0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_531,147.00
	Accounting Fees		\$ 79,468.29
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify) Escrow, Trustee & Warrant Agent		\$ 17,100.00
	Total		§ 627,715.29

C. OFFERING PR	iiee,number of inve	STORS, EXPENSES AND USE OF	PROCEEDS	
b. Enter the difference between the agg and total expenses furnished in response to proceeds to the issuer."	o Part C — Question 4.a.	This difference is the "adjusted gross	•	149,372,284.7
5. Indicate below the amount of the adjust each of the purposes shown. If the am check the box to the left of the estimate. proceeds to the issuer set forth in response.	ount for any purpose is n The total of the payments:	ot known, furnish an estimate and listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees			□ \$	_ 🗆 \$
Purchase of real estate			□ \$	_ 🔲 \$
Purchase, rental or leasing and installa and equipment			\$	
Construction or leasing of plant building	ngs and facilities		□ \$	\$
Acquisition of other businesses (include offering that may be used in exchange issuer pursuant to a merger)	for the assets or securities	s of another	□ \$	
Repayment of indebtedness			_	_
Working capital			_	_
Other (specify):				
			\$	
Column Totals			s 0.00	
Total Payments Listed (column totals a	dded)		\$ <u></u> 0.	.00
是物件的主义的情况。	D-FEDER	AL SIGNATURE		建筑外外
The issuer has duly caused this notice to be si signature constitutes an undertaking by the i the information furnished by the issuer to a	ssuer to furnish to the U.S	. Securities and Exchange Commis	ssion, upon writte	tle 505, the following on request of its staff,
Issuer (Print or Type)	Signature	11/4/1-1-	Date	
Brazil Ethanol, Inc.	1	THE MAY	3/30/2	007
Name of Signer (Print or Type)	Title of Sign	er (Print or Type)	/ /	
Jorge Cantonnet	President	/		
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- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

. 17			E. STATE Ș	GNATURE						
	t.	Is any party described in 17 CFR 230.262 presently provisions of such rule?			Yes	No ⊠				
		See Appe	endix, Column	5, for state respon	nse.					
	2.	. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.								
	3.	 The undersigned issuer hereby undertakes to furni issuer to offerees. 	sh to the state	administrators, u	oon written request, informa	tion furn	ished by the			
,	4.	limited Offering Exemption (ULOE) of the state in	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
		ssuer has read this notification and knows the contents to authorized person.	be true and ba	s duty caused this	notice to be signed on its beha	alf by the	undersigned			
ss	Jer (F	r (Print or Type) Sign	nature		Date /					
Bra	zil Et	l Ethanol, Inc.	74	The .	3/30/20	20.7				
Na	me (F	e (Print or Type) Titl	e Print or The	pe)						
Jo	rge C	e Cantonnet Py	esident	/						

Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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				AI	PPENDIX				J.
1	Intend to non-a investors	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disquali under Sta (if yes, explana waiver ((Part E-	te ULOE attach tion of granted)
State	Yes	No	Units 18,750,000	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ								-	
AR									
CA		×	\$4,000,000.00	1	\$4,000,000.	0	\$0.00		×
СО							1		
СТ							-		
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ı	1	2	3			4		5 Disqualification		
	to non-a	I to sell accredited as in State a-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ate ULOE attach ation of granted) -Item 1)	
State	Yes	No	Units 18,750,000	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
МТ										
NE										
NV										
NH										
ИJ			•							
NM										
NY		×	\$2,920,000.00	6	\$2,920,000.	0	\$0.00		×	
NC										
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ОН										
ок										
OR										
PA										
RI										
SC			· ·							
SD										
TN										
TX		×	\$250,000.00	1	\$250,000.0	0	\$0.00		×	
UT				T						
VT										
VA			1						$\overline{\Box}$	

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	Intend to sell and aggregate to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)						
State	Yes	No	Units 18,750,000	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											